

Rock Star Reading Log



Name: _____

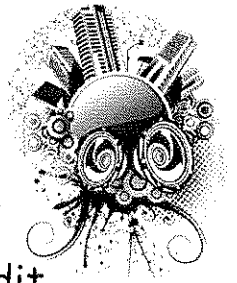
Please return your log on Friday. It must be filled out for the whole week to be considered for full credit.

| | Book Title | Author | How many pages did you read? | How many minutes did you read? |
|--------------------------|------------|--------|------------------------------|--------------------------------|
| Monday Date: _____ | | | | |
| Tuesday Date: _____ | | | | |
| Wednesday Date: _____ | | | | |
| Thursday Date: _____ | | | | |

Parent/Guardian Signature



Math Master Log



Please return your log on Friday. It must be filled out for the whole week to be considered for full credit.

| Day of the Week | Which facts did you practice? | How many minutes did you practice? |
|-----------------|-------------------------------|------------------------------------|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |

